



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

#12C
FL
5/7/04

In re Application of: **Brian Joseph McNamara**

Application No.: **09/450,912**

Examiner: **Sheila B. Smith**

Filing Date: **11-29-1999**

Group Art: **2685**

Title: **Dual Band Tuning**

CERTIFICATE OF MAILING

I hereby certify that this correspondence, along with any papers indicated as being enclosed, are being deposited as First Class Mail, postage prepaid, in an envelope addressed to: Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on April 27, 2004.

27 April 2004
Date

Diane A. Sears
Diane A. Sears

Mail Stop Non-Fee Amendment
The Commissioner for Patents
Post Office Box 1450
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RESPONSE TO OFFICE ACTION DATED JANUARY 28, 2004

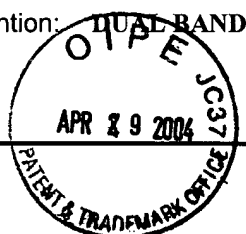
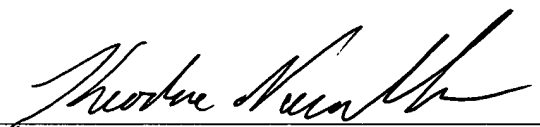
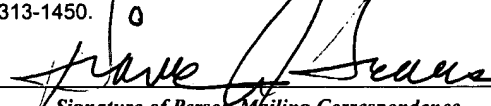
Dear Sir:

In view of the following amendments and remarks responsive to the Office Action dated January 28, 2004, Applicant respectfully requests favorable reconsideration of this application.

Amendments to the specification commence on page 2 of this paper.

Remarks/Arguments commence on page 4 of this paper.

2685

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 17481	
Applicant(s): Brian Joseph McNamara					
Serial No. 09/450,912	Filing Date 11/29/1999	Examiner Sheila B. Smith		Group Art Unit 2685	
Invention: DUAL BAND TUNING					
				RECEIVED MAY 04 2004 Technology Center 2600	
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	21 -	21 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	2 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 1995425. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. </div> <div style="text-align: right;"> Dated: 4.27.04 </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">  <p style="text-align: center;">Signature</p> <p>Theodore Naccarella, Esquire Registration No. 33,023 Synnestvedt & Lechner LLP 2600 Aramark Tower 1101 Market Street Philadelphia, PA 19107 Telephone: (215) 923-4466 Facsimile: (215) 923-2189</p> </div> <div style="width: 50%; border: 1px solid black; padding: 5px;"> <p>I certify that this document and fee is being deposited on 4/27/2004 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p> <div style="text-align: center;">  Signature of Person Mailing Correspondence </div> <div style="text-align: center;"> Diane A. Sears Typed or Printed Name of Person Mailing Correspondence </div> </div> </div>					
CC:					